



# Resurrection Catholic Parish School

21060 SW Stafford Rd.  
Tualatin, OR 97062  
503-638-8869  
schooloffice@rcparish.org  
rcparishschool.org

## Recommendation Letter from Current Teacher and/or Principal

To the current teacher/principal of \_\_\_\_\_  
(Print child's name)

Please release information requested below for my child named above and forward it directly to Resurrection Catholic Parish School at your earliest convenience. Our application to RCPS will not be complete without this form.

\_\_\_\_\_  
(Parent signature) (Date)

**To be filled out by current teacher/principal:** Please complete front and back

Present grade of student: \_\_\_\_\_ Length of time at this school: \_\_\_\_\_

Has attendance been satisfactory? \_\_\_\_\_

Please rate the following using this scale:

E=Excellent, G=Good, F=Fair, U=Unsatisfactory

General attitude\_\_\_\_ Cooperation\_\_\_\_ Effort\_\_\_\_ Conduct\_\_\_\_

School study habits\_\_\_\_ Home study habits\_\_\_\_

Is the student currently receiving or has the student received special services, educational testing or behavior plan? (Speech, language, resource, tutoring . . .?)

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Is the student receiving services for an IEP or 504?

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Any additional remarks?

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Name of person completing this report: \_\_\_\_\_  
(Please Print)

Signature:\_\_\_\_\_

Title:\_\_\_\_\_ Date:\_\_\_\_\_

School name and address:

School phone:\_\_\_\_\_

We appreciate your time in completing this form and assisting us with our admission process. You may email this form to [kfillis@rcparish.org](mailto:kfillis@rcparish.org) or mail to RCPS 21060 SW Stafford Road Tualatin, OR 97062.  
Thank you!